

STATE EMPLOYEES' LEAVE BANK DONATION FORM

**COMPLETE THIS FORM IF YOU WISH TO DONATE LEAVE TO THE
STATE EMPLOYEES' LEAVE BANK**

NAME:	SOCIAL SECURITY:
AGENCY:	AGENCY CODE:
HOME ADDRESS:	CITY:
STATE:	ZIP CODE:

I, _____, hereby certify that I am donating the amount of leave indicated below to establish membership in the State Employees' Leave Bank:

Signature: _____ Date: _____

CERTIFICATION BY APPOINTING AUTHORITY/TIMEKEEPER

- ☐ ANNUAL NUMBER OF HOURS:
- ☐ PERSONAL NUMBER OF HOURS:
- ☐ SICK * NUMBER OF HOURS:

APPLICATION STATUS: ☐ INITIAL ☐ RENEWAL

☐ I have reviewed this employee's leave balances and on the basis of my review, affirm that this employee has sufficient annual/personal leave to make the donation indicated.

☐ * I have reviewed this employee's sick leave balance and on the basis of my review, affirm that this employee has sufficient sick leave so that if the proposed donation were subtracted from the employee's current sick leave balance, the employee would still have a sick leave balance of at least 240 hours.

Signature: _____ Date: _____

**FACT SHEET FOR THE
STATE EMPLOYEES' LEAVE BANK**

*In order to request leave from the State Employees' Leave Bank, an employee must be an active member of the Bank. To join the leave bank, an employee must donate a minimum of eight (8) hours of leave-sick, annual or personal leave or a combination thereof. If donating any amount of sick leave, the employee must have a remaining balance of 240 hours of sick leave.

*Current State employees can only join the Leave Bank during the Open Enrollment period. New employees are eligible to join within the first 60 days of their employment or during Open Enrollment period. Membership is for a two-year period and can be renewed by donating an additional eight (8) hours of leave.
It is the employee's responsibility to maintain his/her membership in the leave bank.

*Eligible State employees can be granted a maximum of 2,080 hours, which includes all employee-to-employee leave donations, throughout their entire career with the State.
Membership in the State Employees' Leave Bank does not mean automatic approval of leave upon submission of a request for leave.

*Criteria for Reviewing Requests for Leave (See COMAR 17.04.11.23J):

- (1) Approval for an eligible employee is **discretionary**, an denial may be based on any reason, which is consistently applied, and that is not illegal or unconstitutional. In denying a request, the Department of Budget and Management may consider these factors:

- (a) A record of sick leave abuse by the employee (one day doctor's slip within the last two years);
- (b) Insufficient medical documentation;
- (c) Unsatisfactory or needs improvement employee performance ratings;
- (d) The amount of leave previously received from the Bank; and/or
- (e) Disciplinary action imposed on the requesting employee.

*Determination by the Secretary (See COMAR 17.04.11.23K):

- (1) Within 30 days of receiving the Request, the Department of Budget and Management shall issue a written determination approving or denying the request.
- (2) An employee's appointing authority may submit a recommendation that the Department of Budget and Management grant or deny a request.
- (3) If an employee runs out of leave before the Department of Budget and Management makes a determination, the employee is granted leave pending the final decision.
- (4) If the application of an employee automatically granted leave is subsequently denied, any leave used is converted to leave without pay, and the employee shall reimburse the State at the minimum rate of $\frac{1}{2}$ of the sick leave earned and, at the employee's discretion, by applying credited annual leave, personal leave, additional sick leave, compensatory leave, or cash payments.

*Inquiries regarding the leave bank may be directed to your agency Leave Bank Coordinator.

Note: Whenever possible, leave bank requests should be submitted 20 workdays prior to the exhaustion of all earned leave.

I certify that I have read the above information and understand its meaning.

Signature

Date